## Edgar Filing: Hendrickson Gary E - Form 4

Hendrickson Form 4										
October 03,										
FORM	<b>A</b> 4 UNITED	STATES					E COMMISSION	N OMB	2235-0287	
Check th			vv a	shington	, D.C. 20	1549		Number: Expires:	January 31,	
if no lon subject t Section Form 4	16. <b>SIAIE</b> N	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							2005 average urs per . 0.5	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							on			
(Print or Type	Responses)									
1. Name and A Hendrickso	Address of Reporting on Gary E	Person <u>*</u>	Symbol	er Name <b>an</b>		-	5. Relationship o Issuer	of Reporting Per	son(s) to	
			POLARIS INDUSTRIES INC/MN [PII]				(Check all applicable)			
(Last) (First) (Middle) 2100 HIGHWAY 55			3. Date of Earliest Transaction (Month/Day/Year) 10/01/2012			_X_ Director Officer (giv below)		% Owner her (specify		
(Street)			4. If Amendment, Date Original 6. Individual or Jo   Filed(Month/Day/Year) Applicable Line)   _X_ Form filed by O			One Reporting Po	oint/Group Filing(Check One Reporting Person Aore than One Reporting			
MEDINA,	MN 55340						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Amount	(D) Price				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	Perso inforr requi	ons who res nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the for ntly valid OMB co	i are not rm	SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g	g., puts, calls,	warrants, option	s, convertible s	securities)	

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Inst	
			Code V	(A)	· · ·	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
CSE (1)	<u>(2)</u>	10/01/2012	А	184.55		(1)	(1)	Common Stock	184.55	\$ 8

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Hendrickson Gary E 2100 HIGHWAY 55 MEDINA, MN 55340	Х						
Signatures							
Jennifer Carbert, Attorney-in-Fact	1	0/03/2012					
**Signature of Reporting Person		Date					

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Common Stock Equivalents (CSE) are credited to director accounts under the Company's Deferred Compensation Plan for
- (1) Non-Employee Directors. The Plan has been approved by a vote of shareholders. Upon termination of his/her services, a Director is entitled to receive one share of common stock for each CSE earned.
- (2) 1 for 1 conversion
- (3) Includes 6.35 CSEs acquired pursuant to a dividend reinvestment feature of the Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.